

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>MG</i>		9/13/00
O.I.P.E. CLASSIFIER		19	5/10/01
FORMALITY REVIEW	<i>W</i>	5C135	10-16-00
RESPONSE FORMALITY REVIEW	<i>W</i>	1091	04/23/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 " Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	8/22/05
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet

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